

## InfoSheet : LAPAROSCOPY

### INTRODUCTION

A laparoscopy is a surgical procedure which allows a doctor to look inside your abdomen and examine your uterus, ovaries, tubes, bladder, liver, and bowel. It involves inserting a very small telescope (5mm in diameter – far smaller than the average pencil) through a very small cut in your belly button. The laparoscope's lens and lighting system allow a clear view of your internal organs. By attaching a video camera to the end of the laparoscope, the surgical team can see the procedure on a television monitor.

### WHAT IS INVOLVED?

You will need to have a general anaesthetic for a laparoscopy. This means that you should not eat or drink from midnight the night before your planned operation.

Once you have had the general anaesthetic a needle is first inserted through your belly button and the abdomen inflated with carbon dioxide gas, making room inside your abdomen to allow visualization. Once this has been done the telescope is inserted through the belly button and the internal organs are examined. A small second incision is usually made just above your pubic bone to pass fine instruments through to help during the procedure.

As well as visualizing the internal organs different surgical procedures can actually be done with the aid of the laparoscope. This might involve making further small incisions for the introduction of instruments to allow the doctor to do such things as cutting adhesions, burning endometriosis, taking biopsies, or tying your tubes.

### WHAT TO EXPECT AFTER YOUR SURGERY

When you wake up in the Recovery Room you might have an oxygen mask over your nose and mouth. Fluids will be given to you intravenously for a few hours, until you are fully recovered. You might experience some hoarseness, a mild sore throat, and some muscle aching for a few days after a general anaesthetic. These symptoms will normally resolve themselves on their own. You

might also feel nauseated and, while still in hospital, will be given intravenous medication to help control this. If you feel nauseated at home, try sips of Ginger Ale and nibble on some dry crackers. When you are feeling better, you can resume a normal diet.

You will not be able to drive yourself home after the operation and should arrange for someone to do this for you. It is best that you arrange for somebody to be with you for at least 24 hours after the operation. You should rest quietly in bed until you are fully recovered from the anaesthetic. You should not drink alcohol for at least 24 hours, as the alcohol's effects will add to those of the anaesthetic and might prove dangerous.

You will have some discomfort after the procedure. Some of this discomfort is related to the incisions made in your belly button and above your pubic bone. Furthermore, as mentioned above, during the procedure your abdomen is inflated with carbon dioxide to allow good visualization of the organs. Although this carbon dioxide is let out of your abdomen at the end of the procedure, the gas itself does tend to irritate the diaphragm, and you might be left with some referred pain in your neck and shoulders for a couple of days. This will normally respond to Advil or Tylenol.

### SELF-CARE AT HOME AFTER THE OPERATION

For the first couple of days after the surgery you should restrict your physical activity. After 72 hours you can usually resume normal activities including exercise. You might have some vaginal bleeding for a couple of days after the operation, and you should use pads, not tampons. You should avoid intercourse for at least three days and, if you have any bleeding after time, please use condoms until the bleeding has stopped completely. You might have some sutures in your belly button and at the incision just above the pubic bone – if so, I will be asking you to have them removed by your family practitioner after 72 – 96 hours. It is wise to put a small amount of Polysporin ointment over the incision sites at least

2 or 3 times day for the first 4 or 5 days after surgery. This will help reduce the risk of skin infection.

It is best to shower and not take baths for the first couple of days after the operation. After this time, you can do whichever you prefer. You should feel better every day. If the pain gets worse, if you notice a fever or malodorous discharge, burning when you urinate, or anything at all that worries you, you must call me right away. The chances of complications are small, but it is very important to identify and treat them early.

Time-off until you are able to work again will depend on the extent of the surgery done at the time of the laparoscopy. After most day-care laparoscopies it is possible to return to work after 3 or 4 days. If more extensive surgery is done at the time of laparoscopy, you might require a week, or sometimes two, off-work.

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